24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
	IDENTIFICATION NUMBER ▼
SENATE CONSERVATIVES FUND	C00448696
Check If X 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Infocision	/ D D / Y Y Y Y
Mailing Address 325 Springside Dr. Amount	01 2012
City State Zip Code Akron OH 44333 Transaction	20000.00
Purpose of Expenditure IE-Stenberg-Survey Calls Category/ Type Office Sought:	House State: NE Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
DON STENBERG Check One:	Support Oppose
Calendar Year-To-Date Per Election for Office Sought 559905.05 Disbursement For 2012 Other (s	Primary General
Full Name (Last, First, Middle Initial) of Payee Printing Express Date	/ D D / Y Y Y Y
Mailing Address PO Box 1975	02 2012
Amount	
City State Zip Code Harrisonburg VA 22801	14579.51
Transaction Office Sought:	ID: SE.4288 House State: NE
IE-Stenberg-Direct Mail Category/ Type Onte Sought.	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Oppose
DON STENDENG	
Calendar Year-To-Date Per Election for Office Sought 833924.56 Disbursement For 2012 Other (s	
(a) SUBTOTAL of Itemized Independent Expenditures	34579.51
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Lisa Lisker [Electronically Filed] Date 05 02	D / Y Y Y Y Y Y 2012
Signature	